

PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-876

**FEES DETERMINED
SUBSTITUTE FOR FORM PTO-901**

APPLICATION AS FILED - PART

REED - PART
(Column 1) (Column 2)

(Column 1)		(Column 2)		SMALL ENTITY		OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA		RATE (\$)	FEES (\$)	RATE (\$)	FEES (\$)
BASIC FEE (37 CFR 1.16(e), (f), or (g))							
SEARCH FEE (37 CFR 1.16(h), (i), or (j))							
EXAMINATION FEE (37 CFR 1.16(l), (m), or (n))							
TOTAL CLAIMS (37 CFR 1.16(l))		minus 20 =		X	=	X	=
INDEPENDENT CLAIMS (37 CFR 1.16(n)).		minus 3 =		X	=	X	=
APPLICATION SIZE FEE (37 CFR 1.16(s))		if the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 11(a)(1)(G) and 37 CFR 1.16(s).					
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(q))				TOTAL		TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

* If the difference in column 1 is less than zero, enter '0' in column 1.

If the difference in column 1 is less than zero, enter '0' in column 2

APPLICATION AS AMENDED - PART II

7607

AMENDMENT A	(Column 1)			(Column 2)			(Column 3)			SMALL ENTITY RATE (\$1) ADDITIONAL FEE (\$1)	OR	OTHER THAN SMALL ENTITY RATE (\$1) ADDITIONAL FEE (\$1)		
	CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	X	=					X	=
Total 37 CFR 1.16(l)	11	Minus	80		=	X	=		X	=				
Independent 37 CFR 1.16(p)	2	Minus	0		=	X	=		X	=				
Application Size Fee (37 CFR 1.16(s))									TOTAL ADD'L FEE			TOTAL ADD'L FEE		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(l))														

AMENDMENT B	(Column 1)			(Column 2)			(Column 3)			RATE (\$1) ADDITIONAL FEE (\$1)	OR	RATE (\$1) ADDITIONAL FEE (\$1)		
	CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	X	=					X	=
Total 37 CFR 1.16(l)	•	Minus	•		=	X	=		X	=				
Independent 37 CFR 1.16(p)	•	Minus	•		=	X	=		X	=				
Application Size Fee (37 CFR 1.16(s))									TOTAL ADD'L FEE			TOTAL ADD'L FEE		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(l))														

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.
Collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to process all application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This will aid in the gathering, preparing, and submitting the completed application.
Amount of time is

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the highest Number Previously Bolded $c = 1$ then
- If the x_i 's are all bolded then

If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".
If the Highest Number Previously Paid For IN THIS SPACE is less than 10, enter "10".

The Highest Number Previously Paid For (Total or Independent) Is the highest number previously paid for in this space, enter.

The "Highest Number Previously Paid For" (Total or Independently) is the highest amount previously paid for in this space is less than \$20, enter "20". The "Highest Number Previously Paid For" (Total or Independently) is the highest amount previously paid for in this space is less than \$3, enter "3".

The Highest Number Previously Paid For IN THIS SPACE Is less than 20, enter "20".
The Highest Number Previously Paid For IN THIS SPACE Is less than 3, enter "3".

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the amount of time you require to complete the application. The information is required to obtain a building permit.

amount of time you require to complete this form and/or suggestions for reducing it to a minimum. Preparing, and submitting the completed application form to the USPTO. The trademark Office, U.S. Department of Commerce.

REMARKS: Please type or print clearly to complete this form and/or suggestions for reducing this burden.
ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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